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PTO/SB/83 (11-96)

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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT**

Application Number	10/082,364
Filing Date	2/25/2002
First Named Inventor	Wasserman
Group Art Unit	
Examiner Name	
Attorney Docket Number	9264.2

To: Commissioner for Patents
PO BOX 1450
Alexandria, VA 22313-1450

I hereby apply to withdraw as attorney or agent for the above identified application.

APPROVED
JOHN J. LOVE
DIRECTOR TC 3800
11-28-03
m 20

The reasons for this request are:

Correspondences by mail, email and faxes have not been responded to by client.

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- ☐ The correspondence address is NOT affected by this withdrawal.
- ☒ Change the correspondence address and direct all future correspondence to:

<input type="checkbox"/> Customer Number <input type="text"/>		CORRESPONDENCE ADDRESS		Place Customer Number Bar Code Label here	
OR					
<input checked="" type="checkbox"/> Firm or Individual Name	Hector Pereda				
Address	Viotran, LLC				
Address	455 S. Orange Ave. #100				
City	Orlando	State	FL	ZIP	32801
Country	US				
Telephone	(800) 248-4173	Fax	(407) 447-252		

This request is enclosed in triplicate.

Name	JOHN J. CONNORS
Signature	
Date	October 20, 2003

NOTE: Withdrawal is effective when approved rather than when received.
Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.